

JUN 30 2004

OFFICIAL

Attorney Docket No. VPI/98-19 US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Lauffer, et al.
ASSIGNEE: Vertex Pharmaceuticals Incorporated
SERIAL NUMBER: 10/039,898 EXAMINER: V. Balasubramanian
FILING DATE: January 3, 2002 ART UNIT: 1624
CONF. NO.: 8724
FOR: CYCLIZED AMINO ACID DERIVATIVES

June 30, 2004
Cambridge, Massachusetts

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

PETITION FOR EXTENSION OF TIME

Pursuant to 37 C.F.R. § 1.136(a)(3), applicants hereby petition for a three month extension of time to respond to the Office Action March 30, 2004. With the extension, a response is due on or before June 30, 2004.

The Commissioner is authorized to charge the requisite fee of \$950.00 that is due under 37 C.F.R. § 1.17(a)(3) to Deposit Account No. 50-0725. A duplicate copy of this Petition is enclosed herewith.

Respectfully submitted,


Nandakumar Govindaswamy

Limited Recognition

Attorney for Applicants

c/o Vertex Pharmaceuticals Incorporated
130 Waverly Street
Cambridge, Massachusetts 02139
Tel: (617) 444-6619
Fax: (617) 444-6483

07/21/2004 6DUCKETT 00000010 500725 10039898

01 FC:1253 950.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10/039 892

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	22	20
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	22 minus 20 =	* 2
INDEPENDENT CLAIMS	1 minus 3 =	* 0
MULTIPLE DEPENDENT CLAIM PRESENT <input checked="" type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

6/30/4

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 8	Minus ** 22	=
Independent	* 1	Minus *** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	370.00
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	FEE
BASIC FEE	740.00
X\$18=	36.
X84=	
+280=	280
TOTAL	1056

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL	